

PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4018).

**FEE TRANSMITTAL
For FY 2007**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 630.00**Complete If Known**

| | |
|----------------------|-------------------------|
| Application Number | 10/767,471 |
| Filing Date | January 30, 2004 |
| First Named Inventor | Michele CARGILL |
| Examiner Name | Stephen Thomas KAPUSHOC |
| Art Unit | 1634 |
| Attorney Docket No. | CL1505ORD |

**RECEIVED
CENTRAL FAX CENTER****MAY 29 2007****METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-2781 Deposit Account Name: Celera

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|---------------------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims | Extra Claims | Fee (\$) |
| - 20 or HP = _____ x _____ = _____ | | |
| HP = highest number of total claims paid for, if greater than 20. | | |
| Indep. Claims | Extra Claims | Fee (\$) |
| - 3 or HP = _____ x _____ = _____ | | |
| HP = highest number of independent claims paid for, if greater than 3. | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| _____ | _____ | _____ | _____ | _____ |

4. OTHER FEE(S)


Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2nd Month Extension Fee (450.00); Fee for IDS submission (180.00)

Fees Paid (\$)

830.00

SUBMITTED BY

| | | | |
|-------------------|---|--|------------------------|
| Signature |  | Registration No. (Attorney/Agent) 41,420 | Telephone 510 749 4378 |
| Name (Print/Type) | Ben Wang | Date May 29, 2007 | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**RECEIVED
CENTRAL FAX CENTER**

MAY 29 2007

**CELERA**

An Applera Corporation Business

1401 Harbor Bay Parkway, Alameda, CA 94502
phone 510 749 4200 fax 510 749 6200
www.celera.com**Confidential****FAX**

NUMBER OF PAGES INCLUDING COVER: 23

DATE MAY 29, 2007

TO PATENT EXAMINER: STEPHEN THOMAS KAPUSHOC

FAX NO. 571.273.8300

FROM BEN WANG
SR. PATENT ATTORNEY

PHONE 510.749.4378

FAX 510.749.1895

Re: US Serial No.: 10/767,471 filed: 01/30/2004

Entitled: "GENETIC POLYMORPHISMS ASSOCIATED WITH RHEUMATOID ARTHRITIS,
METHODS OF DETECTION AND USES THEREOF"

Atty. Docket No.: CL1505ORD

Attached: **RESPONSE TO OFFICE ACTION; PETITION FOR EXTENSION OF TIME;
SUPPLEMENTAL IDS**Ben Wang
Sr. Patent Attorney
Celera
1401 Harbor Bay Parkway
Alameda, CA 94502
Phone: 510.749.4378
Fax: 510.749.1895
Email: ben.wang@celera.com

The information contained in this facsimile message is privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and dispose of this message.

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.


| | | | |
|---|----------------------|-------------------------|-----------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/767,471 | |
| | Filing Date | January 30, 2004 | |
| | First Named Inventor | Michele CARGILL | |
| | Art Unit | 1634 | |
| | Examiner Name | Stephen Thomas KAPUSHOC | |
| Total Number of Pages in This Submission | 22 | Attorney Docket Number | CL1505ORD |

RECEIVED
CENTRAL FAX CENTER


MAY 29 2007

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks 1 Reference from IDS (6 pgs) | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|--------|
| Firm Name | | | |
| Signature |  | | |
| Printed name | Ben Wang | | |
| Date | May 29, 2007 | Reg. No. | 41,420 |

CERTIFICATE OF TRANSMISSION/MAILING

| | | | |
|---|---|------|--------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | |
| Signature |  | | |
| Typed or printed name | Ben Wang | Date | May 29, 2007 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.